

**MANUFACTURED HOME / OWNER RECORD INFORMATION REQUEST**

Wisconsin Department of Commerce

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

NOTE: This form may be photocopied for future use.

**This request must be completed before information about a Wisconsin manufactured home/owner record can be obtained.**  
Knowledge of what access and uses are permitted under the listed Federal Acts is the responsibility of the requester.

**Section A – Requester Information**

Name – Firm or Corporation	DMV Agency Code/Account # - If Applicable	(Area Code) Telephone Number	
Name – Person Completing This Form		(Area Code) Telephone Number	
Street Address	City	State	Zip Code
Mailing Address (If Different from Above)	City	State	Zip Code

**Section B – Request for Record Information** – Complete if requesting individual owner/home records only.**I (we) request the following record information:**☐ **Manufactured Home Record Information** – Please explain request in the Comments area below.

Full name of Person about whom records(s) are being requested

1

2

Identification Number	Year	Make	Body Length	Body Width	Information Requested	
					Current	History
1					<input type="checkbox"/>	<input type="checkbox"/>
2					<input type="checkbox"/>	<input type="checkbox"/>
3					<input type="checkbox"/>	<input type="checkbox"/>

**Comments** – Please be specific when describing your request, for example, a complete history, current owner only, etc.**Section C – Authorization** - Please check the statement below that allows you authorization to obtain personal information. Sign certification.**I (we) are authorized under the Federal Driver's Privacy Protection Act to obtain the identified records and personal information based on the following:**

- ☐ 1. Authorized for use, if the requester demonstrates that they have obtained the written consent from the person about whom the information pertains. This is not for DMV account holders.
- ☐ (a) I am requesting a copy of my own record.
- ☐ (b) I am a parent or legal guardian of a minor child and am requesting a copy of his/her record.
- ☐ (c) I am requesting the record of another person and have attached their written consent.
- ☐ 2. For use in connection with matters of motor vehicle or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research; and removal of non-owner records from the original owner records of motor vehicle manufacturers to carry out the purposes of the Automobile Information Disclosure Act, The Motor Vehicle Information and Cost Saving Act, The National Traffic and Motor Vehicle Safety Act of 1966, the Anti-Car Theft Act of 1992, and the Clean Air Act

**Please sign on the reverse side.**

- ☐ 3. A government agency (federal, state, or local) or employed by such, for the purpose of the government agency to carry out its functions.
- ☐ 4. A federal, state, circuit, local, or tribal court, or employed by such, for the purpose of the court to carry out its functions.
- ☐ 5. A Wisconsin or out-of-state law enforcement agency, or employed by such, for the purpose of the law enforcement agency to carry out its functions.
- ☐ 6. Authorized representative, agent, contractor, or employed by such, of a legitimate business and the home/owner record being requested will be used for normal course of business, but only to:
- a. Verify accuracy of the personal information;
  - b. Obtain correct information, but only for purposes of preventing fraud, pursuing legal remedies, or collecting a debt.
- ☐ 7. Authorized for use in connection with any civil, criminal, administrative, or arbitral proceeding in any federal, state, circuit, local, or tribal court or agency, or before any self-regulatory body, including the service of process, investigation in anticipation or litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a federal, state, circuit, local, or tribal court.
- ☐ 8. Authorized for use in research activities and producing statistical reports, as long as the personal information is not published, redisclosed, or used to contact individuals.
- ☐ 9. Authorized representative, agent, contractor, or employed by such, of an insurer, insurance support organization or self-insured entity and the home/owner record(s) being requested will be used only in connection with the following:
- a. Claims investigation;
  - b. Anti-fraud activities;
  - c. Rating or underwriting.
- ☐ 10. Authorized for use in providing notice to the owners of towed or impounded vehicles
- ☐ 11. Authorized representative or owner of a licensed private investigative agency or licensed security service and the home/owner record is being requested for the use of purposes permitted under the Federal Driver's Privacy Protection Act.
- ☐ 12. Authorized as an employer, or its agent or insurer for use in obtaining or verifying information relating to a holder of a commercial driver license (CDL).
- ☐ 13. Authorized representative or owner of a private toll transportation facility for use in the operation of the facility.

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I (we) certify that the information and statements on this request are true and correct, comply with the provisions of the Federal Driver's Privacy Protection Act and understand that the willful, unauthorized disclosure of information obtained from these records for a purpose other than stated on this request, or the sale or other distribution of the information to a person or organization not disclosed in this request may result in penalties imposed under Title 18 U.S.C. Section 2724.

**X**

(Requester Signature)

(Date Signed)

**Fees: Class Code-8200**

\$3.00 per owner, or home, or DisID record and \$0.25 per photocopy.

An additional fee of \$3.00 is required for certification of documents.

Make check or money order payable to: **Department of Commerce**

**NOTE:** Incomplete or incorrect information provided in section "B" may result in an additional \$3 fee per record.

**Mail to:**

(Attach completed request and fee)

Department of Commerce  
Division of Safety and Buildings  
Manufactured Home Unit  
PO Box 1355  
Madison, WI 53701-1355

**Please attach a stamped, self-addressed envelope for return of the requested information.**